

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

CLAIMS AS FILED - PART I				SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)							
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE			RATE	FEE
BASIC FEE (37 CFR 1.16(a))					\$ 385	OR			\$
TOTAL CLAIMS (37 CFR 1.16(c))	26	minus 20 =	* 6	x \$ 9 =	54	OR		x \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	6	minus 3 =	* 3	x 43 =	129	OR		x =	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				+ 145 =	145	OR		+ =	
				TOTAL	713	OR		TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY		
(Column 1)		(Column 2)		(Column 3)							
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE			RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ =		OR		x \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x =		OR		x =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR		+ =	
					TOTAL		OR		TOTAL		

AMENDMENT B					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY		
(Column 1)		(Column 2)		(Column 3)							
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE			RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ =		OR		x \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x =		OR		x =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR		+ =	
					TOTAL		OR		TOTAL		

AMENDMENT C					SMALL ENTITY		OR		OTHER THAN SMALL ENTITY		
(Column 1)		(Column 2)		(Column 3)							
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE			RATE	ADDITIONAL FEE	
	Total (37 CFR 1.16(c))	*	Minus	**	=	x \$ =		OR		x \$ =	
	Independent (37 CFR 1.16(b))	*	Minus	***	=	x =		OR		x =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ =		OR		+ =	
					TOTAL		OR		TOTAL		

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.